## U.S. IMMIGRATION AND CUSTOMS ENFORCEMENT ENFORCEMENT AND REMOVAL OPERATIONS ICE HEALTH SERVICE CORPS

## PATIENT ESCORTS

IHSC Directive: 03-26

ERO Directive Number: 11760.1

Federal Enterprise Architecture Number: 306-112-002b

Effective Date: 24 Mar 2016

## By Order of the Acting Assistant Director Stewart D. Smith, DHSc/s/

1. **PURPOSE:** The purpose of this issuance is to set forth the policies and procedures for establishing systematic activities that are organized and implemented for patient escorts within ICE facilities.

- 2. APPLICABILITY: This directive applies to all Immigration and Customs Enforcement (ICE) Health Service Corps (IHSC) personnel, including but not limited to, Public Health Service (PHS) officers and civil service employees supporting health care operations in ICE-owned or contracted detention facilities and to IHSC Headquarters (HQ) staff. This directive applies to contract personnel when supporting IHSC in detention facilities and at HQ.
- AUTHORITIES AND REFERENCES: None.
- 4. **POLICY:** IHSC ensures detainees/residents are escorted/transported safely and in a timely manner for medical, dental and mental health appointments both inside and outside the facility.
  - **4-1. Notification**. When a detainee/resident is scheduled for medical services appointments, health staff will notify the transporting custody staff to arrange for escorting/transporting the detainee within 72 hours of the scheduled appointment, unless it is an emergency.
    - (1) Health staff will inform custody staff if special accommodations are needed during the escort/transport process, i.e. assistive devices, etc.
    - (2) Custody staff will ensure that personnel are available to escort detainees/residents from housing to medical services for their scheduled appointments.
    - (3) Detainee/resident confidentiality will be maintained during the entire escort process and adequate care consistent with the detainee/resident's health needs are provided.

- **4-2. Off-site Escorts.** Custody staff will have written guidance to address off-site escorts/transports. This guidance will include, but not limited to: prioritization of medical need, custody personnel accompanying detainee/resident, urgency (ambulance versus standard transport), transfer of medical information and log documentation.
  - (1) After notification by health staff, custody will make the necessary arrangements for transporting detainee/resident off site to the scheduled appointment. Custody staff will ensure that appropriate custodial officers are available to escort detainees/residents and remain with detainee/resident for the duration of any off-site appointment.
  - (2) Health staff and custody staff will ensure transports are conducted on a timely basis.
  - (3) Health staff will notify custody staff if special accommodations are required and; if applicable, a sufficient supply of medication is made available for administration during transport.
  - (4) Health staff will ensure appropriate documentation for the referral and applicable medical records accompany detainee/resident to appointment in a sealed envelope.
  - (5) Upon return to the facility, custody staff will provide all documents provided during off-site appointment to health staff, if applicable.
- **4-3. Missed Appointments.** All missed appointments will be documented in the medical record and the Health Services Administrator (HSA) will be notified.

A monthly report of missed appointments will be maintained by the Health Services Administrator (HSA) containing the detainee/resident's demographics, date of scheduled appointment, type of appointment, reason appointment was missed, and status of the appointment (rescheduled, cancelled, etc.).

- PROCEDURES: None
- 6. HISTORICAL NOTES: No previous historical notes.
- 7. **DEFINITIONS:** See: GLOSSARY FOR IHSC OFFICIAL GUIDANCE
- 8. APPLICABLE STANDARDS:
  - 8-1. Performance Based National Detention Standards (PBNDS): Medical Care, B. Designation of Authority

- **8-2.** American Correctional Association (ACA): 4-ALDF-4C-06, Transportation
- 8-3. National Commission on Correctional Health Care (NCCHC): Standards for Jails, 2014.

  J-E-10. Patient Escort
- 9. PRIVACY AND RECORDKEEPING. IHSC stores, retrieves, accesses, retains, and disposes of these records in accordance with the Privacy Act and as provided in the Alien Medical Records System of Records Notice, 80 Fed. Reg. 239 (January 5, 2015). The records in the electronic health record (eHR)/eClinicalWorks (eCW) are destroyed ten (10) years from the date the detainee leaves ICE custody. Retention periods for records of minors may differ. Paper records are scanned into eHR and are destroyed after upload is complete.

## Protection of Medical Records and Sensitive Personally Identifiable Information (PII).

- 9-1. Medical records, whether electronic or paper, may only be disclosed to or accessed by those officers and employees of the agency which maintain the record who have a need for the record in the performance of their duties. Paper records must be secured at all times within a locked cabinet or room when not under the direct control of an officer or employee of the agency with a need for the record in the performance of their duties.
- **9-2.** Staff is trained at orientation and annually on the protection of patient medical information and Sensitive PII.
- 9-3. Staff references the Department of Homeland Security Handbook for Safeguarding Sensitive Personally Identifiable Information (March 2012) at:

when additional information is needed concerning safeguarding Sensitive PII.

10. NO PRIVATE RIGHT STATEMENT. This directive is an internal policy statement of IHSC. It is not intended to, and does not create any rights, privileges, or benefits, substantive or procedural, enforceable against the United States; its departments, agencies, or other entities; its officers or employees; or any other person.